MIECHV Benchmarks

Desk Guide

August 2024

This guide will give you:

The MIECHV definition of each of the Benchmark measures

The number of cases in the cohort that meet the measure (Numerator)

The cohort being reported on (Denominator)

Your focus; what to make sure to do

Where to find the information relevant to each benchmark in the MIS

Benchmark 1: Preterm Birth
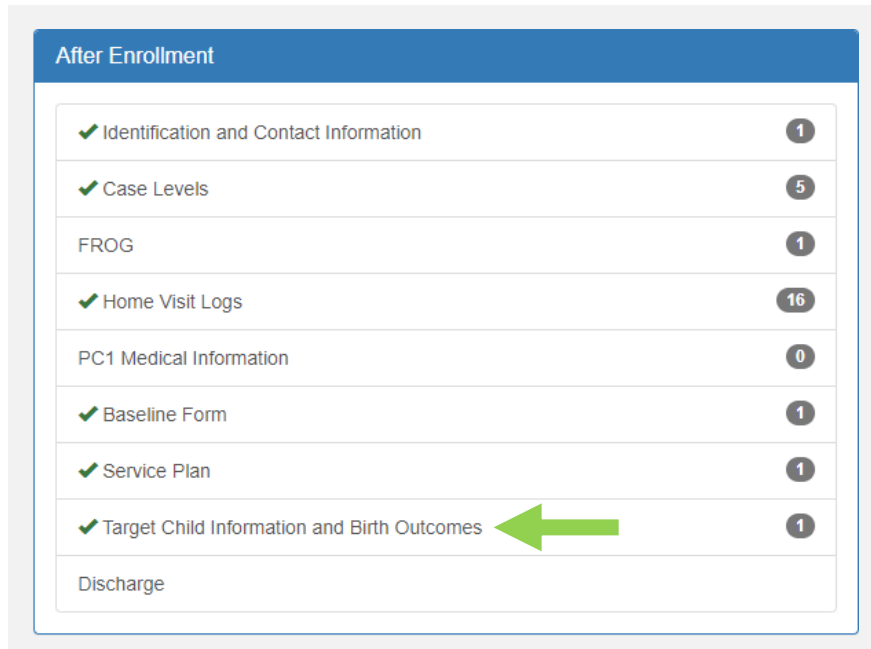Domain: Improvements in maternal, newborn, and child health

📊 **Definition:** Percent of children (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preterm following program enrollment (note: lower is better).
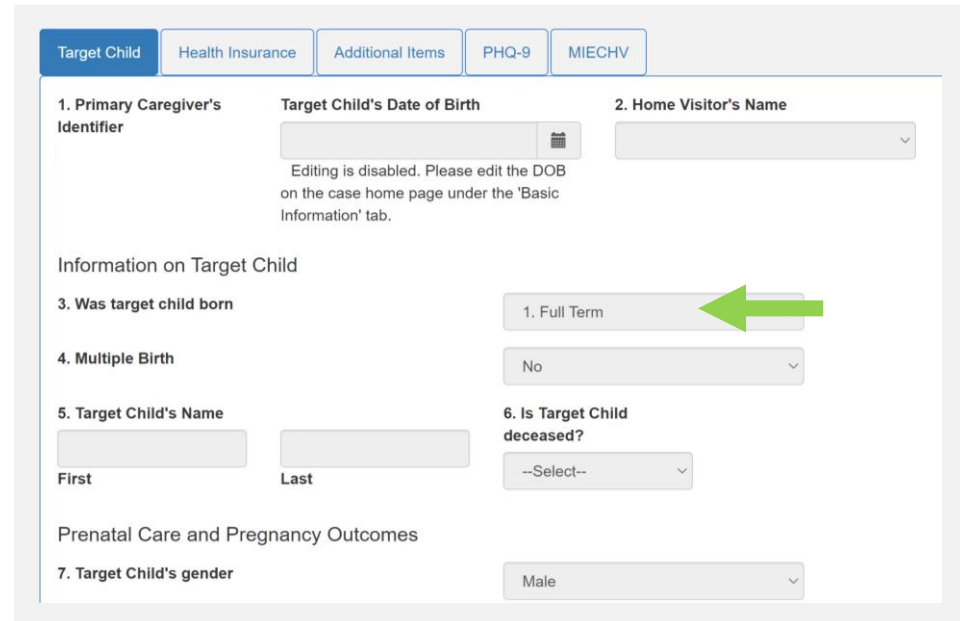
👥 **Cases that meet measure** (Numerator): # of children born who were premature (born before 37 weeks of gestation).

👥 **Total cohort** (Denominator): # of children who were born to mothers enrolled prenatally before 37 weeks.

🎯 **Your Focus:** Make sure to record the birth term.

Benchmark 1: Preterm Birth
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **Birth Outcomes |** High

Report Notes | Includes all TCs *(MIECHV: only PC1s enrolled before 37 weeks)*; breaks out by trimester of enrollment

Birth Outcomes

Cohort: All children (TCs and Others) born in period with at least 1 Home Visit AFTER TC's birth (to potentially record birth outcome info).

Site Name: <--All -->

FSS:

Children born between: 1/1/2024 and 3/31/2024 ← Selectable date range

Case Filters Used: <-- None -->

Target Children (TC)

PC1s with a TC born in period	8		
Denominator TCs born in period	8		
TCs who were multiples	0	0%	
PC1s who received prenatal care	7	88%	
Birth Term			
Full Term TC's	8	100%	
Numerator Premature TC's	0	0%	**%**
Missing birth term	0	0%	
Birth Weight			
Normal birth weight	8	100%	
Low birth weight	0	0%	
Missing birth weight	0	0%	

Excluded from MIECHV reporting →

🔍 **MIS Report | Match Quality**   **Prenatal/Postnatal Cases |** Low

Report Notes | Provides a chart of premature births by year, but includes all TCs *(MIECHV: only PC1s enrolled before 37 weeks)*; provides a list of PC1IDs of prenatal and postnatal cases with important birth outcomes data

Prenatal/Postnatal Case Details

Cohort: All active clients currently being served who are both female and biological parent to a child who is either prenatal or a live birth as of 04/01/2024

Site Name: <--All -->   **Case Filters Used:**   <-- None -->

Point In Time: 4/1/2024   **Report Run Date:**   5/7/2024

Legend: 🟩 Premature Baby Percentage 🟧 Statewide Premature Percentage

Selectable point in time

Year	Premature Baby %	Statewide Premature %
2014	11%	9%
2015	9%	10%
2016	14%	11%
2017	16%	11%
2018	12%	11%
2019	17%	12%
2020	18%	12%
2021	14%	12%
2022	15%	12%
2023	14%	13%
2024	29%	15%

Annual comparisons of premature births at site vs. all HFNY

Prenatal and postnatal cases are separated

Prenatal

PC1ID	Target Child Expected Date Of Birth	Intake Date	Weeks Pregnant at Intake	PC1 Under 21 At Expected Date of Birth	PC1 FROG SCORE	Receiving Prenatal Care
			34	No	16	Yes

Postnatal

PC1ID	Target Child Date Of Birth	Intake Date	Weeks Pregnant at Intake	Birth Weight	Fed Breast Milk	Birth Type	Gestational Age	Delivery Type	PC1 Under 21 At Birth	Multiple Birth	PC1 FROG Score	Received Prenatal Care
			30	6.69 lbs	Yes	Full Term	40	V	No	No	11	Yes
			27	3.13 lbs	No	Premature	30	C	No	Yes	18	Yes

Benchmark 2: Breastfeeding
Domain: Improvements in maternal, newborn, and child health

📊 **Definition:** Percent of children (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age.

👥 **Cases that meet measure** (Numerator): # of children aged 6-12 months (and enrolled prenatally) who were breastfed any amount at 6-month follow-up visit.

🏛 **Total cohort** (Denominator): # of children who are 6-12 months (reached 6 months in the reporting period) and were enrolled prenatally who have had a 6- or 12-month follow-up visit.

🎯 **Your Focus:** Have ongoing conversations with moms about breastfeeding.

Benchmark 2: Breastfeeding
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: item PCI1a |** High

Report Notes | Goes by PC1 not TC so multiple births not counted; includes all TCs (where PC1 is biomom) 6-15 months old who were enrolled prenatally *(MIECHV: TCs 6-12 months old where PC1 is biomom, enrolled prenatally, and has 6-month follow up)*

Selectable quarter or date range

List of PC1s not meeting the measure

Performance Targets

Site: <--All -->

Case Filters used:

3rd Quarter: 01/01/24 - 03/31/24

Contract: 07/01/23 - 06/30/24

Parent Child Interaction Targets	Valid Cases			
	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
PCI1a. Primary Care Taker 1 breast feeding 30% of PC1s who were enrolled pre-natally will breast feed their target children for at least 6 months from the birth of the child Cohort: Families that were enrolled pre-natally where target children are now 6 to 15 months of age	39%	12	31	36

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form Reason	Current Worker / Level @ Report End	Explanation
PCI1a		03/06/2023	1 year Follow Up No breast feeding	Level 3	
PCI1a		08/23/2023	6 month Follow Up Breast fed < 6 months	Level 1	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
PCI1a		07/27/2023	6 month Follow Up		Form missing	Level CO

MIECHV reporting cohort includes TCs aged *6-12 months* (and enrolled prenatally)

% Numerator Denominator

List of PC1s with invalid/missing data (excluded from measure)

Benchmark 3: Depression Screening
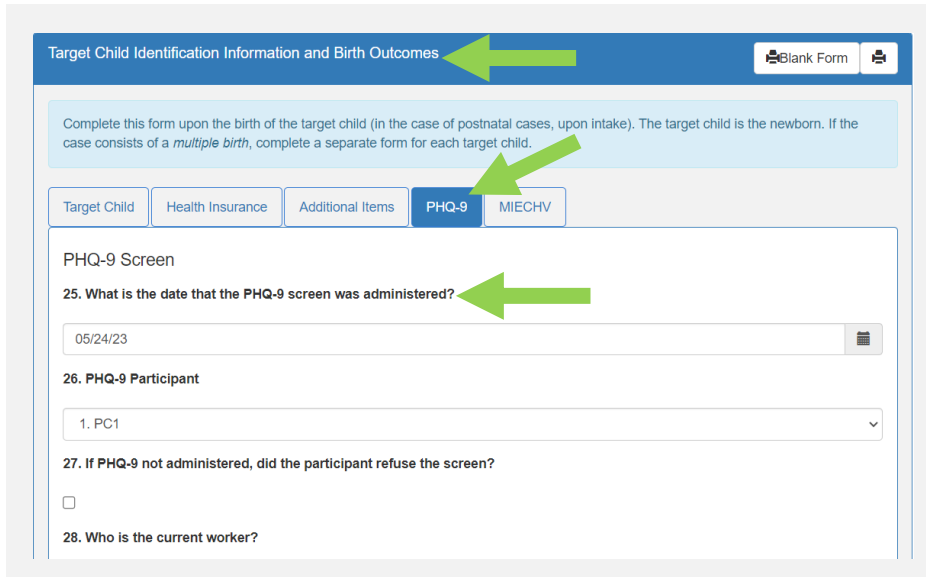Domain: Improvements in maternal, newborn, and child health

📊 **Definition:** Percent of primary caregivers (PC1s) enrolled in home visiting who are screened for depression using a validated tool (PHQ-9) within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally).

👥 **Cases that meet measure** (Numerator): For those not enrolled prenatally, # of PC1s enrolled in home visiting who are screened for depression (PHQ-9) within the first 3 months since enrollment; for those enrolled prenatally, # of PC1s screened for depression (PHQ-9) within 3 months of delivery.

Total cohort (Denominator): For those not enrolled prenatally, # of PC1s enrolled in home visiting for at least 3 months (reached within the reporting period); for those enrolled prenatally, # of PC1s enrolled in home visiting for at least 3 months post delivery (reached within the reporting period).

🎯 **Your Focus:** Do the PHQ9 and record it!

-OR-

Benchmark 3: Depression Screening
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **7-4.C Postnatal Administration of Depression (PHQ9) Screen |** Medium-low

Report Notes | Excludes PC1s who refused all PHQ9s within 6 months of TC's DOB *(MIECHV counts these cases)*; cohort includes cases that have been enrolled in the last 12 months as of the report's selected date *(MIECHV cohort: PC1s who reached 3 months post-delivery or post-enrollment during reporting period)*

Cohort includes prenatal and postnatal enrollees in the last 12 months as of the report's selected date

Selectable point in time

7-4.C Postnatal Administration of the PHQ9 Screen for 04/01/2024

Cohort: See the report documentation for the cohort description...

Site: <--All -->   **Case Filters used: <-- None -->**

Scoring Criteria:

3 - At least 95% of cases in the cohort were screened at least once postnatally within 3 months.

2 - 80% - 94% of cases in the cohort were screened at least once postnatally within 3 months.

1 - Less than 80% of cases in the cohort were screened at least once postnatally within 3 months OR less than 100% of cases in the cohort were screened at least once postnatally within 6 months.

Current Performance:

Numerator (%)

# of Cases in Cohort	Screened within 3 Months	Screened within 6 Months
41	41 (100%)	41 (100%)

Denominator

List of PC1s and PHQ screening details

Worker:		Supervisor:				
PC1ID	Current Level	TC DOB	Intake Date	PHQ Date	Screened within 3 Months?	Screened within 6 Months?
	Level CO-term	04/11/2023	04/28/2023	04/28/2023	Yes	Yes

Prenatal enrollees: within 3 months of TC's DOB

Postnatal enrollees: within 3 months of enrollment (same as MIECHV reporting)

Benchmark 4: Well-Child Visit
Domain: Improvements in maternal, newborn, and child health

📊 **Definition:** Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule.

👥 **Cases that meet measure** (Numerator): # of children enrolled in home visiting (at least 8 days old) who received the last recommended well child visit based on the AAP schedule.

🏛 **Total cohort** (Denominator): # of children enrolled in home visiting aged 8 days or older at last home visit.

🎯 **Your Focus:** Have conversations with PC1 about getting well-child visits on time; record them when they happen.

Benchmark 4: Well-Child Visit
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **MIECHV Well Child Visits (Benchmark 4) Report |** High

Report Notes | Assesses TCs aged 8 or more days with at least one home visit during the reporting period who received their last recommended well child visit based on the AAP schedule *(MIECHV: same requirements)*

MIECHV Well Child Visits (Benchmark 4) Report for 04/01/2023 - 06/30/2024 ← Selectable date range

Site: <--All -->   Case Filters Used: <-- None -->

Summary

Denominator →

# of Target Children	# Meeting Standard
57	34 (60%)

← Numerator (%)

Details

Current Worker: Supervisor:

List of TCs and detailed well child visit information →

PC1ID	Target Child	TC DOB	Last Home Visit Date in Period	TC Age as of Last Home Visit	Discharge Date	Discharge Reason
		03/22/2023	01/01/2024	0 Year(s) 9 Month(s) 10 Day(s)		

Lists AAP schedule visits that were due between the intake date and the last home visit for the case in the period →

Date of recorded well child visit that falls within "Due Between" range →

AAP Schedule Visit Description	Due Between	Date of Matching Well Child Visit	Included in Summary?
6-7 month Well baby Visit	09/20/2023 - 10/21/2023		Yes
4-5 month Well baby Visit	07/21/2023 - 08/22/2023		No
2-3 month Well baby Visit	05/21/2023 - 06/22/2023	05/22/2023	No
2-4 week Well baby Visit	04/05/2023 - 04/19/2023		No
3-7 day Well Baby Visit	03/25/2023 - 03/29/2023	03/25/2023	No

Only the most recent visit is included in the summary →

Benchmark 4: Well-Child Visit
Domain: Improvements in maternal, newborn, and child health

Performance Indicator

🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: items HD5, HD6 |** Low

Report Notes | HD5 assesses TCs aged 15-21 months with at least 5 well-baby visits; HD6 assesses TCs aged 27-33 months with at least 2 well-baby visits *(MIECHV: TCs 8 days or older at last home visit with last recommended well-baby visit)*

Selectable quarter or date range

List of PC1s not meeting the measures

Performance Targets

Site: <--All -->

Case Filters used:

3rd Quarter: 01/01/24 - 03/31/24

Contract: 07/01/23 - 06/30/24

Health and Development Targets	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
	Valid Cases			
HD5. Target Child Well Baby Medical Provider Visits by 15 months At least 90% of Target children will have at least 5 well baby visits by 15 months of age. Cohort: Target children 15 months to 21 months of age	98%	44	45	45
HD6. Target Child Well Baby Medical Provider Visits by 27 months At least 90% of Target children will have 2 well baby visits between 15 and 27 months of age. Cohort: Target children 27 months to 33 months of age	93%	27	29	29

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form / Reason	Current Worker / Level @ Report End	Explanation
HD5		10/24/2022	TC Medical Missing Well Baby Visits	Level CO	
HD6		09/10/2021	TC Medical Missing Well Baby Visits	Level CO	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
HD6		09/16/2021	TC Medical		Form not reviewed by supervisor	Diana Mejia Level 3

MIECHV reporting cohort includes TCs aged *8 days or older at last home visit* and assesses whether TC received *last* recommend well-baby visit

% Numerator Denominator

List of PC1s with invalid/missing data (excluded from measures)

Benchmark 5: Postpartum Care
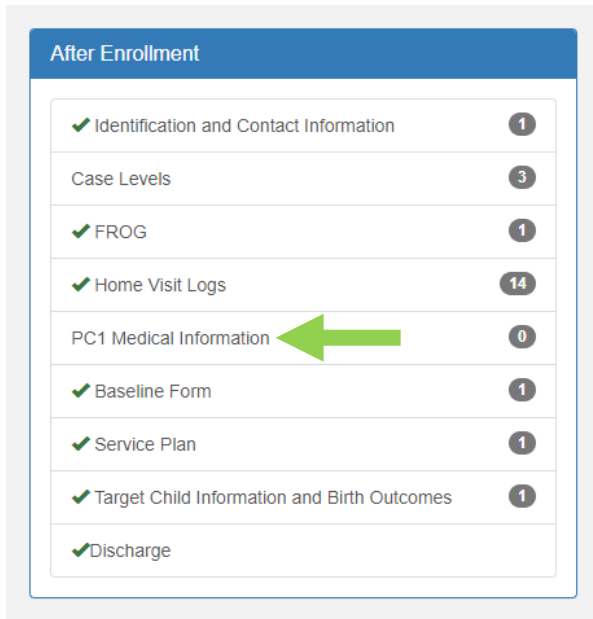Domain: Improvements in maternal, newborn, and child health

📊 **Definition:** Percent of mothers enrolled in home visiting prenatally (or within 30 days after delivery) who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery.

👥 **Cases that meet measure** (Numerator): # of mothers enrolled in home visiting prenatally (or within 30 days after delivery) who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery.

👪 **Total cohort** (Denominator): # of mothers who enrolled in home visiting prenatally (or within 30 days after delivery) and remained enrolled for at least 8 weeks (56 days) after delivery (reached in the reporting period).
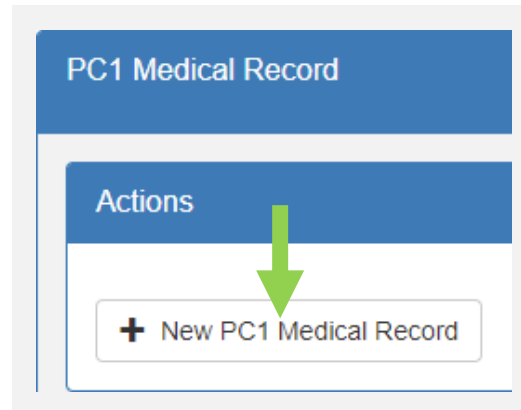
🎯 **Your Focus:** Have conversations with moms about getting a postpartum visit; record it when it happens.
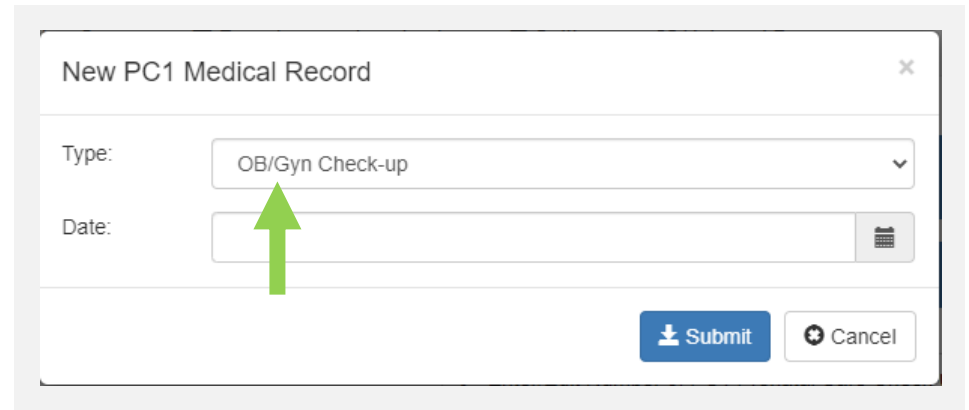
Benchmark 5: Postpartum Care
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **PC1 Medical Record Analysis (Recent) |** Medium-high

Report Notes | Cohort includes all recently enrolled PC1s (non-discharged) with an intake date between three months before the report start date up until the end date of the report *(MIECHV cohort: PC1s who reached 56 days post-delivery in reporting period)*

PC1 Medical Record Analysis (Recent Enrollees)

Cohort: All cases that have an Intake that is dated between 02/01/2024 and 07/31/2024 that have not been discharged as of 07/31/2024. For details about eligibility and meeting, please see the report documentation.

Site Name: <--All -->   Case Filters Used: <-- None -->

Recommended Record Summary

Total Cases:	Recommended Record	Eligible	Not Eligible	Eligible & Meeting	Eligible & Not Meeting
24	1-56 Days Postpartum OBGYN Visit	14 (58%)	10 (42%)	3 (21%)	11 (79%)

Selectable end date

Intake date range: three months before start date – selectable start date

Denominator

Numerator (%)

Recommended Record Details

Worker:				Supervisor:			
PC1ID	TCDOB	Intake Date	Recommended Record		Eligible?	Meeting?	Matching PC1 Medical Record
	07/01/2024	07/16/2024	1-56 Days Postpartum OBGYN Visit		Yes	No	
	05/22/2024	06/20/2024	1-56 Days Postpartum OBGYN Visit		Yes	Yes	OB-Gyn Check-up (06/04/2024)

List of PC1IDs and postpartum visit details

If PC1 is meeting the requirements, date of postpartum visit will be displayed

Benchmark 6: Tobacco Cessation Referrals

Domain: Improvements in maternal, newborn, and child health
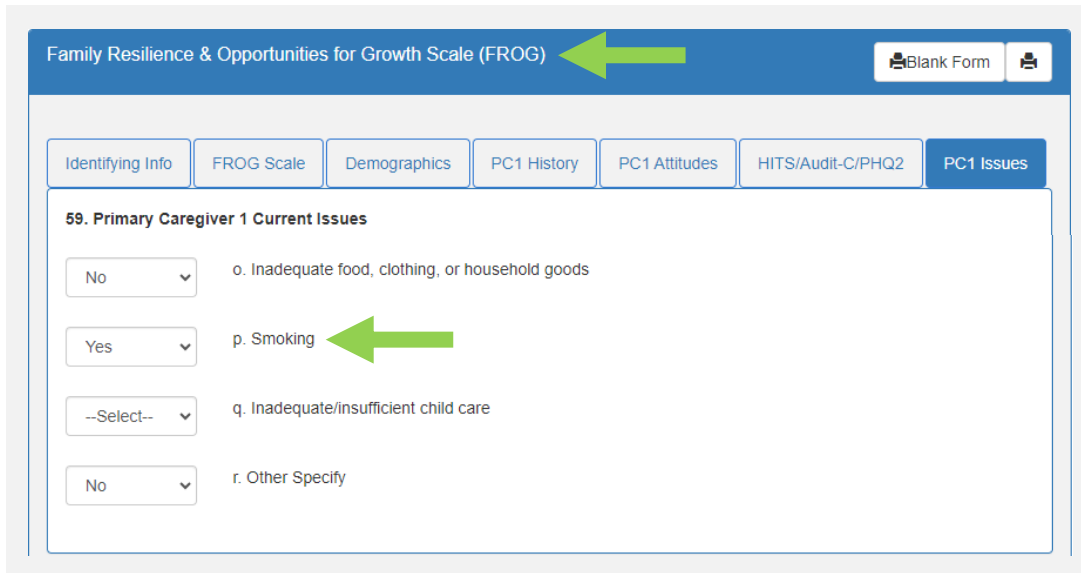
📊 **Definition:** Percent of primary caregivers (PC1s) who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.

👥 **Cases that meet measure** (Numerator): # of PC1s who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.

🏛 **Total cohort** (Denominator): # of PC1s who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months (reached within the reporting period).

🎯 **Your Focus:** Ask about tobacco use at enrollment and make the referral if necessary; record the referral.

Benchmark 6: Tobacco Cessation Referrals
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **Count of Service Referrals by Code |** Low

Report Notes | Counts the # of smoking cessation referrals (service code: 20) in a given period (category will not appear on report if no corresponding referrals were given in the period), but does not have a denominator of PC1 biomoms who reported this as an issue; has no timeframe *(MIECHV cohort: PC1s who have been enrolled for at least 3 months who indicated smoking was an issue at intake)*

Count of Service Referrals by Code

Selectable date range → **From 1/1/2024 To 3/31/2024**

Case Filters used: <-- None -->

Worker: All Workers

Service Category: Health Care (HC)
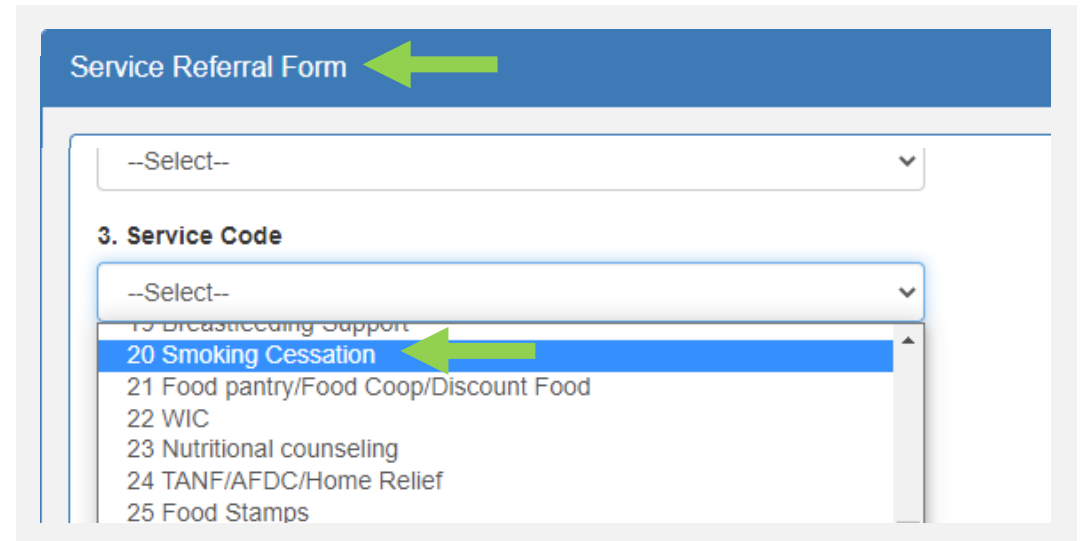
Service Code	# of Referrals
01-Adult primary care	1
02-Child primary care	1
07-Early Intervention (EIP)	6
09-Immunization	1
11-Prenatal care	4
17-Developmental screening & services	3
18-Other health service	3
19-Breastfeeding Support	5
20-Smoking Cessation	2
Total for (HC)..	26

← Numerator

Note: no denominator of PC1s who reported smoking as an issue

Benchmark 6: Tobacco Cessation Referrals
Domain: Improvements in maternal, newborn, and child health

🔍 **MIS Report | Match Quality** **6-4.C/D Use of Health and Safety and Safer Sleep Practice |** Low

Report Notes | Assesses whether FSS provided information on health and safety practices, including smoking cessation within 1, 2, and 4 months of the first content visit, but doesn't provide information about referrals; requires a discussion about smoking cessation for all PC1 biomoms, not just those who smoke

Cohort includes cases with…
- Intake date ≤ report end date and ≥ 2/1/22 (date policy went into effect)
- Prenatal or less than 1 year as of the intake date and report end date
- First content visit ≤ report end date and ≥ 7/15/23
- No level CO between first content visit and four months after first content visit
- Non-discharged or discharge > report start date

6-4.C/D Use of Health and Safety and Safer Sleep Practice

Site: <--All -->   Case Filters used: <-- None -->

	Within 1 Month	Within 2 Months	Within 4 Months
Eligible Cases	44	31	13
Cases Meeting Requirements	0 (0%)	4 (13%)	1 (8%)
Cases Meeting Recommendations	0 (0%)	0 (0%)	0 (0%)

Denominator → Eligible Cases
Numerator (%) → Cases Meeting Requirements

Current Worker: Supervisor:

PC1ID	Intake Date	Discharge Date	First Content Visit	Meeting 1 Month Req	Meeting 2 Month Req	Meeting 4 Month Req	Meeting 1 Month Rec	Meeting 2 Month Rec	Meeting 4 Month Rec
	05/12/2023		07/20/2023	No. Missing: Shaken Baby Syndrome, Infant/Child Feeding, Nutrition, Breastfeeding, Smoking Cessation, Selection of Childcare Providers/Caretakers,	Yes	No. Missing: Dental and Oral Health,	No. Missing: Water Temperature, Pool and Tub Safety, Car Seat Safety,	No. Missing: Fire Safety, Firearm Safety,	No. Missing: Medications, Cleaning Products, Emerging Ability to Roll Over,

If not meeting, lists missing items →

Benchmark 7: Safe Sleep
Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

📊 **Definition:** Percent of children enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing or soft bedding.

👥 **Cases that meet measure** (Numerator): # children (aged less than 1 year) enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing or soft bedding.

🪦 **Total cohort** (Denominator): # of children enrolled in home visiting who are aged less than 1 year.

🎯 **Your Focus:** Have ongoing discussions with PC1s about safe sleep practices.

Benchmark 7: Safe Sleep
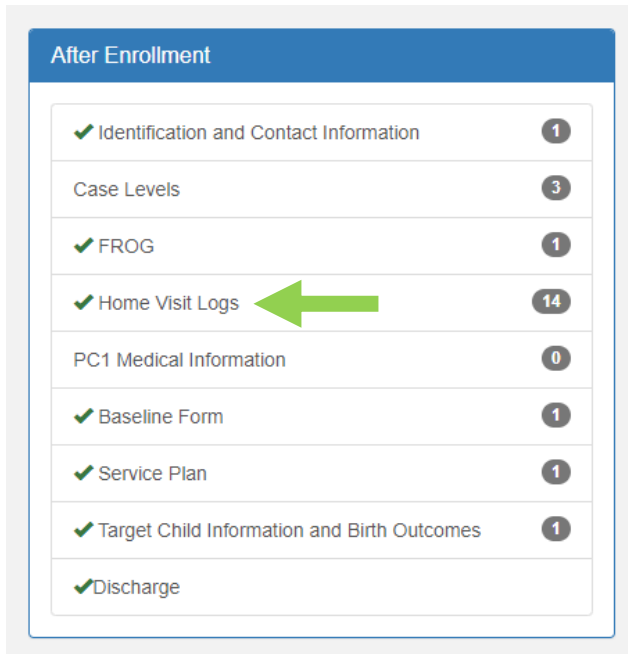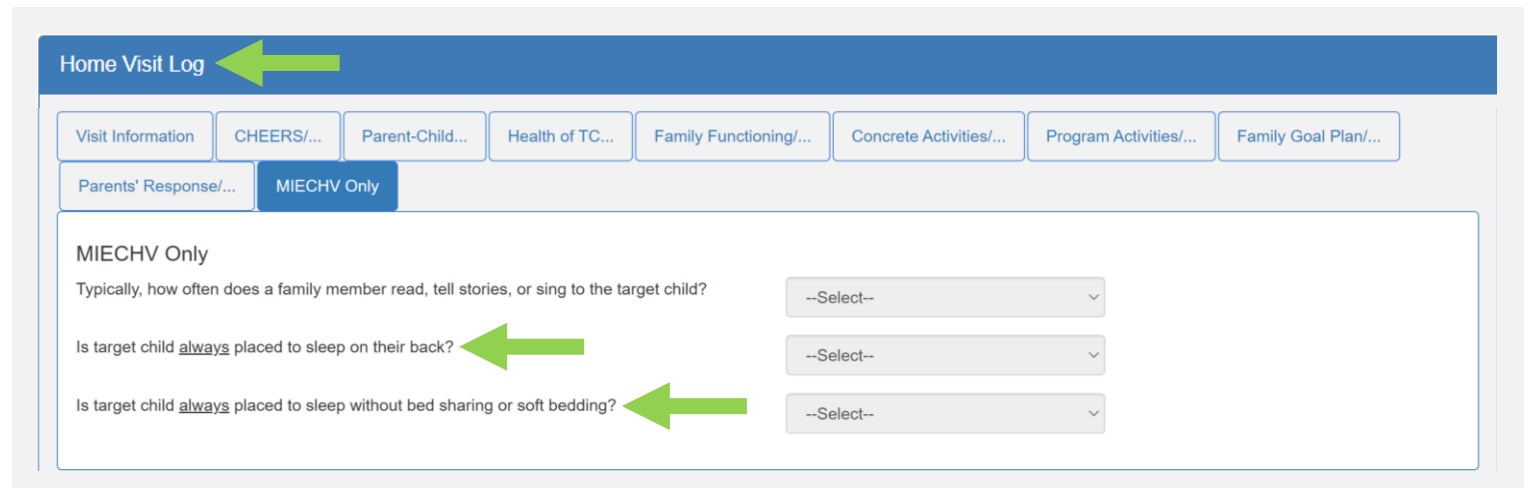Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

Performance Indicator

🔍 **MIS Report | Match Quality** **Summary of Home Visit Log Activities |** Medium-low

Report Notes | Shows the % of postnatal home visit logs where safe sleep items were met *(MIECHV: % of TCs with affirmative answers)*; not limited by TC age *(MIECHV cohort: TCs who are less than one year)*

Denominator is the # of postnatal home visits during the period (MIECHV reporting: # of TCs aged less than 1 year)

Selectable date range

% of postnatal home visits where TC is recorded as always placed to sleep on back + always placed to sleep without bed sharing or soft bedding

Summary Of Home Visit Log Activities
From 1/1/2024 To 3/31/2024

Site: <--All -->   Case Filters used: <-- None -->

Percentage of time these activities were engaged in during all completed home visits (* - Postnatal visits only)

Parents or Other Caregiver	15		MIECHV Only	
Medical/Prenatal Appointment(s)	15		**Family member reads/sings/tells stories**	
ER visit(s)	0		**to the target child (*)**	87
			Every day of the week (MIECHV target)	21
Health Care Activities	50		Most days of the week	27
Provide general health information	31		Several days of the week	32
Provide child health information	28		Not at all	7
Provide info on health providers	5		Unknown	13
Provide dental health information	6			
Provide advocacy/support, medical	2		**Is target child always placed to sleep on**	
Provide info on prenatal/postnatal care	2		**their back? (*)**	33
Provide labor/delivery info/support	2		Yes	33
Provide breast feeding info/support	3		No	1
Provide infant/child feeding	3		Unknown	67
Provide nutrition/food prep. info	7			
Provide family planning info.	10		**Is target child always placed to sleep**	
Provide safe sex/STD info.	6		**without bed sharing or soft bedding? (*)**	33
Provide FASD information	0		Yes	32
Provide info/equip. on child safety	16		No	1
Provide info on smoking cessation	1		Unknown	67
Provide SIDS/Safe Sleep info	3		**MIECHV Safe Sleep Measure**	
Provide prenatal smoking/SA info	0		**(Performance Measure 7) (*)**	32
Provide water temp safety info	0			

Benchmark 8: Child Injury
Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

Systems
Outcome

📊 **Definition:** Rate of injury-related visits to the Emergency Department (ED) during the reporting period among enrolled children (note: lower is better).

👥 **Cases that meet measure** (Numerator): # of parent-reported nonfatal injury-related visits to the ED during the reporting period among children enrolled in home visiting.

👥 **Total cohort** (Denominator): # of children enrolled in home visiting.

🎯 **Your Focus:** Record date and reason for Emergency Department visits due to accident or injury (choices 1 to 16 in dropdown).

Benchmark 8: Child Injury
Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

🔍 **MIS Report | Match Quality** **Summary of Home Visit Log Activities |** Medium-low

Report Notes | Shows % of home visit logs where an ED visit for TC was recorded *(MIECHV: rate of ED visits among TCs)*

Summary Of Home Visit Log Activities
From 1/1/2024 To 3/31/2024 ← Selectable date range

Site: <--All -->   Case Filters used: <-- None -->

Denominator is the # of postnatal home visits during the period (MIECHV reporting: # of TCs) →

Percentage of time these activities were engaged in during all completed home visits (* - Postnatal visits only)

Curriculum used - Primary	73		Health of TC and Parents	
Growing Great Kids GGK P36	7		**Target Child (*)**	18
Growing Great Kids for Preschoolers	3		Medical/well-baby appointments	16
Partners for a Healthy Baby by Florida State University	65		Immunizations	7
			ER visit(s)	2
Parents as Teachers Foundational 1 (P36)	0			
			Concrete Activities/Referrals	
Parents as Teachers Foundational 2 (Ages 3-6)	0		**Concrete Activities**	23
			Provide/arrange transportation	0
Healthy Babies, Healthy Families: San Angelo	0		Provide/arrange household goods	4
			Address legal needs	4
			Provide info/assist with housing	4
Curriculum used - Approved Supplemental	0		Provide advocacy	3
Baby Talk	0		Translation	0
Just In Time	0		Discuss child support issues	2
Growing Great Families	1		Discuss visitation issues	10
Growing Great Kids: Play With Me!	0		Discuss parental rights issues	6

% of postnatal home visits where an ED visit for TC was recorded ←

Benchmark 9: Child Maltreatment

Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

📊 **Definition:** Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period (note: lower is better).

👥 **Cases that meet measure** (Numerator): # of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period.

👥 **Total cohort** (Denominator): # of children enrolled in home visiting.

🎯 **Your Focus:** HFNY's focus is always to prevent child abuse, neglect, or maltreatment.

OCFS Pulls this data annually from CONNECTIONS, it is not in MIS

Benchmark 9: Child Maltreatment

Domain: Prevention of child injuries, child abuse, neglect, or maltreatment and reductions of ER visits

🔍 **MIS Report | Match Quality** Active Participant Roster | Low

Report Notes | Lists PC1IDs and TCs referred by the HFNY program to the Statewide Central Register (SCR) in the last 12 months

No selectable date;
uses current date

Active Participant Roster - as of 5/9/2024

Site: <--All -->   Case Filters Used: <-- None -->

Give to Peer Review Team a few days before the Site Visit or at the time of the participant file review.

Worker: Supervisor:

Family Case ID	TC DOB	Enrollment Date	Level	Length in Program	Developmental Delay?	SCR in Last 12 Months?	Family Enrolled in CWP?	Elevated Depression Screen?
	12/20/2021	06/01/2021	Level CO	2 Years, 11 Months, 8 Days				

Data comes from "Date that HFNY Program called SCR hotline" field on the supervision form; if yes, date is included; if no, response is blank

Benchmark 10: Parent-Child Interaction
Domain: Improvements in school readiness, child academic achievement

📊 **Definition:** Percent of primary caregivers (PC1s) enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool (CHEERS Check-In Tool).

👥 **Cases that meet measure** (Numerator): # of PC1s enrolled in home visiting who received an observation of caregiver-child interaction by the home visitor in the past year using a validated tool (CHEERS Check-In Tool).

🏛 **Total cohort** (Denominator): # of PC1s enrolled in home visiting with children reaching the target age range (6 to 60 months).

🎯 **Your Focus:** Do the CHEERS Check In!

Benchmark 10: Parent-Child Interaction
Domain: Improvements in school readiness, child academic achievement

🔍 **MIS Report | Match Quality** **6-3.D CHEERS Check-In Observations |** Low

Report Notes | Includes TCs aged 12-48 months old *(MIECHV: TCs aged 6-60 months old)*; looks for TCs to receive at least 2 CHEERS Check-Ins per year *(MIECHV: 1 per year)*; excludes families who declined CHEERS Check-In

Selectable
start date

List of TCs and
CCI details

"Meets all: 'Yes'" = "Meets?"
column for each year has
"yes" or "Pre-BPS8"

6-3.D CHEERS Check-In Tool Credentialing report

Cohort: All active families with a TC that is between 12 and 48 months old as of 1/1/2024.

Site: <--All -->   Case Filters used: <-- None -->

Calculation of Score	**Overall**	**Recent Practice**
	2 forms per year	1 form last 6 months
Count of TC's between 12 and 48 months old:	152	152
Count of TC's meeting standard:	152	85
% of TC's meeting standard:	100%	56%
	Score: 3	

Denominator
Numerator
%

Scoring Legend (BPS 8th ed.)

3 = At least 90% of TCs (aged at least 12 months) receive at least 2 CHEERS Check-Ins per year until TC is 3 years old.

2 = While past instances of less than 90% of TCs receiving 2 CHEERS Check-Ins per year have occurred, in the last 6 months, at least 90% of TCs have had 1 CCI screen completed.

1 = Less than 90% of families (with TCs aged at least 8 months) received at least 2 CHEERS Check-In per year until TC is 3 years old.

Current Worker: Supervisor:

TC Name: TC DOB: 04/11/2021 (33m)   Gestational Age: 26   Meets all: Yes
Intake Date: 07/27/2021   Meets RP: Yes

Year	Meets?	CCI Interval	Date Completed	Declined?	Age of TC
0	Pre-BPS8				
		4-6	9/24/2021	No	5 months
1	Pre-BPS8				
		8-10	4/20/2022	No	12 months
		16-18	11/10/2022	No	19 months
		20-22	12/20/2022	No	20 months

Benchmark 11: Early Language & Literacy Activities
Domain: Improvements in school readiness, child academic achievement

Performance Indicator

📊 **Definition:** Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily.

👥 **Cases that meet measure** (Numerator): # of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day.

👥 **Total cohort** (Denominator): # of children enrolled in home visiting.

🎯 **Your Focus:** Have ongoing discussions about the importance of these activities; record it in the HV Log section below.

Benchmark 11: Early Language & Literacy Activities
Domain: Improvements in school readiness, child academic achievement

Performance Indicator
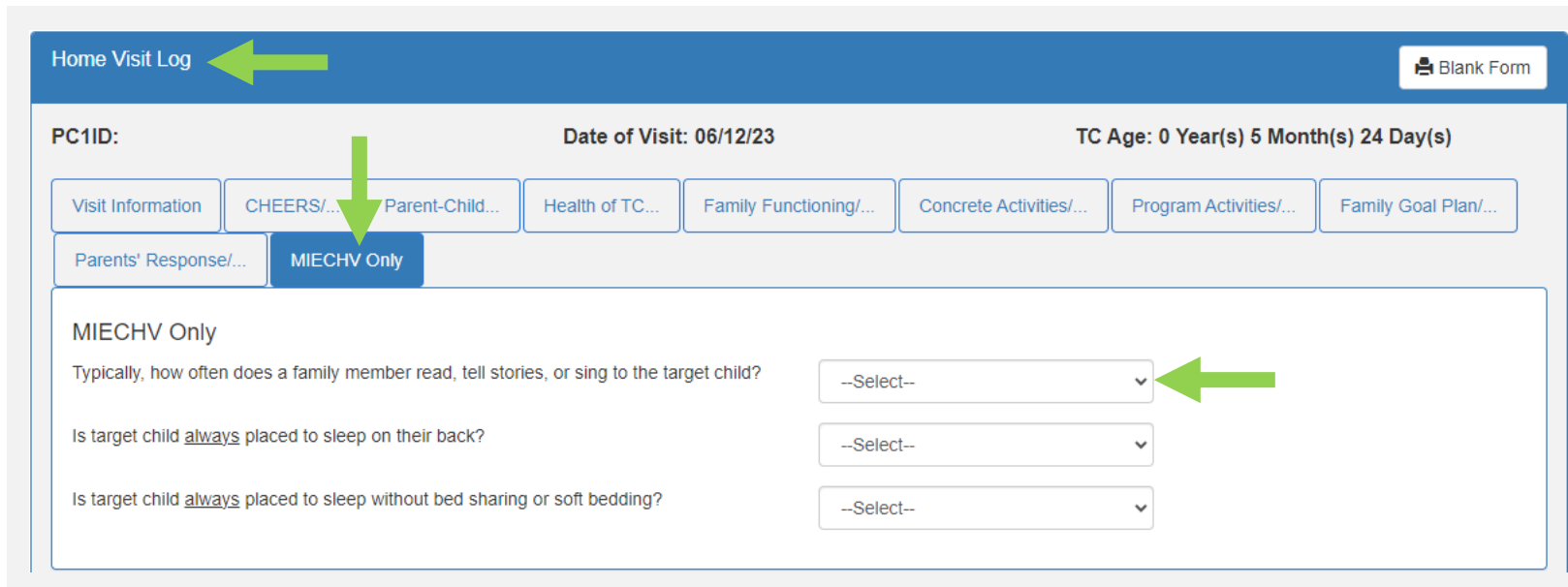
🔍 **MIS Report | Match Quality** **Summary of Home Visit Log Activities |** Medium-low

Report Notes | Shows % of postnatal home visits where FSS recorded that a family member read/sang/told stories to TC every day of the week *(MIECHV: % of TCs who were read to, told stories, or sung to as of last home visit in period)*

Denominator is the # of postnatal home visits during the period (vs. MIECHV reporting: # of TCs)

Selectable date range

% of postnatal home visits where it is reported that a family member read/sang/told stories to TC every day of the week

Summary Of Home Visit Log Activities
From 1/1/2024 To 3/31/2024

Site: <--All -->   Case Filters used: <-- None -->

Percentage of time these activities were engaged in during all completed home visits (* - Postnatal visits only)

Parents or Other Caregiver	15	
Medical/Prenatal Appointment(s)	15	
ER visit(s)	0	

MIECHV Only

Family member reads/sings/tells stories to the target child (*) — 87

Every day of the week (MIECHV target)	21
Most days of the week	27
Several days of the week	32
Not at all	7
Unknown	13

Health Care Activities	50	
Provide general health information	31	
Provide child health information	28	
Provide info on health providers	5	
Provide dental health information	6	
Provide advocacy/support, medical	2	
Provide info on prenatal/postnatal care	2	
Provide labor/delivery info/support	2	
Provide breast feeding info/support	3	
Provide infant/child feeding	3	
Provide nutrition/food prep. info	7	
Provide family planning info.	10	
Provide safe sex/STD info.	6	
Provide FASD information	0	
Provide info/equip. on child safety	16	
Provide info on smoking cessation	1	
Provide SIDS/Safe Sleep info	3	
Provide prenatal smoking/SA info	0	
Provide water temp safety info	0	

Is target child always placed to sleep on their back? (*) — 33

Yes	33
No	1
Unknown	67

Is target child always placed to sleep without bed sharing or soft bedding? (*) — 33

Yes	32
No	1
Unknown	67

MIECHV Safe Sleep Measure (Performance Measure 7) (*) — 32

Benchmark 12: Developmental Screening
Domain: Improvements in school readiness, child academic achievement

📊 **Definition:** Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool (Ages & Stages Questionnaire, ASQ).

👥 **Cases that meet measure** (Numerator): # of children (aged 9-31 months) who had at least 1 age-appropriate ASQ in the past year.

👥 **Total cohort** (Denominator): # of children aged 9-31 months.

🎯 **Your Focus:** Follow the recommended schedule for the ASQ.

Benchmark 12: Developmental Screening
Domain: Improvements in school readiness, child academic achievement

🔍 **MIS Report | Match Quality** **6-5.B ASQ – Developmental Screening Summary and Details |** Low

Report Notes | Requires at least 2 ASQs per year up to age 3 and 1 ASQ per year after age 3 *(MIECHV: requires only 1 ASQ per year)*

Selectable start date

Per worker and program total

6-5.B ASQ - Developmental Screening Summary for 01/01/2024

Site: <--All --> 　　Case Filters used: 　 <-- None -->

Standard: At least 2 developmental screens up to age 3 and 1 per year after.
This is a threshold standard, meaning to be in adherence a minimum threshold has been established (90% in this case).

Worker	Total TC	Meets	Meets RP	Not Meets	EI
	15	11 (100%)	11 (100%)	0 (0%)	4 (27%)
Program Total	212	165 (95%)	165 (95%)	8 (5%)	40 (19%)

6-5.B ASQ - Developmental Screening Details for 01/01/2024

Site: <--All --> 　　Case Filters used: 　 <-- None -->

Overall Standard: At least 2 developmental screens up to age 3 and 1 per year after

Current Worker:				Supervisor:			
	TC Name:			TC DOB: 04/11/2021 (30m)	Gestational Age: 26	Meets all: EI	
	Intake Date: 07/27/2021					Meets RP: EI	

Year	Meets?	ASQ Interval	Date Completed	Calculated age of TC at screening	Window	TC Receiving EI
0	EI					
		06	Jan 18, 2022	6 months	In Window	Yes
		08	Apr 18, 2022	9 months	In Window	Yes
		09	May 18, 2022	10 months	In Window	Yes
		10	Jun 1, 2022	11 months	In Window	Yes

Meets: # (%) of non-EI TCs that meet the requirements for in window ASQ screens for ALL years included in the report.

Meets RP: # (%) of non-EI TCs that meet the requirements for in window ASQ screens for the most recent year included in the report.

EI: # (%) of total TCs who are marked as receiving early intervention (EI) services (excluded from "meets")

List of TCs and ASQ details

🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: item HD7 |** Low

Report Notes | Assesses % of TCs who score above cutoff on ASQ or are referred to services if delays detected (who did not previously score under cutoff on ASQ and are not receiving EI/DD services) *(MIECHV: % of TCs who are not already receiving services with an ASQ in past year)*; cohort includes TCs aged 4 months and older *(MIECHV: TCs aged 9-31 months)*

Selectable quarter or date range

List of PC1s not meeting the measure

Performance Targets

Site: <--All -->   3rd Quarter: 01/01/24 - 03/31/24

Case Filters used: Contract: 07/01/23 - 06/30/24

Health and Development Targets	Valid Cases			
	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
HD7. Age Appropriate Developmental level At least 98% of target children will demonstrate age appropriate developmental milestones on the Ages and Stages Questionnaire or be referred for further evaluations/services if delays are detected. Cohort: Target children 4 months and older	97%	117	121	122

% Numerator Denominator

MIECHV reporting cohort includes TCs aged *9-31 months* and assesses whether TC received a timely ASQ screen

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form Reason	Current Worker / Level @ Report End	Explanation
HD7		09/16/2021	30 months Under cutoff scores without EIP referral	Level 3	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
HD7		08/25/2023	6 months		Form missing	Level 1

List of PC1s with invalid/missing data (excluded from measure)

Benchmark 13: Behavioral Concerns
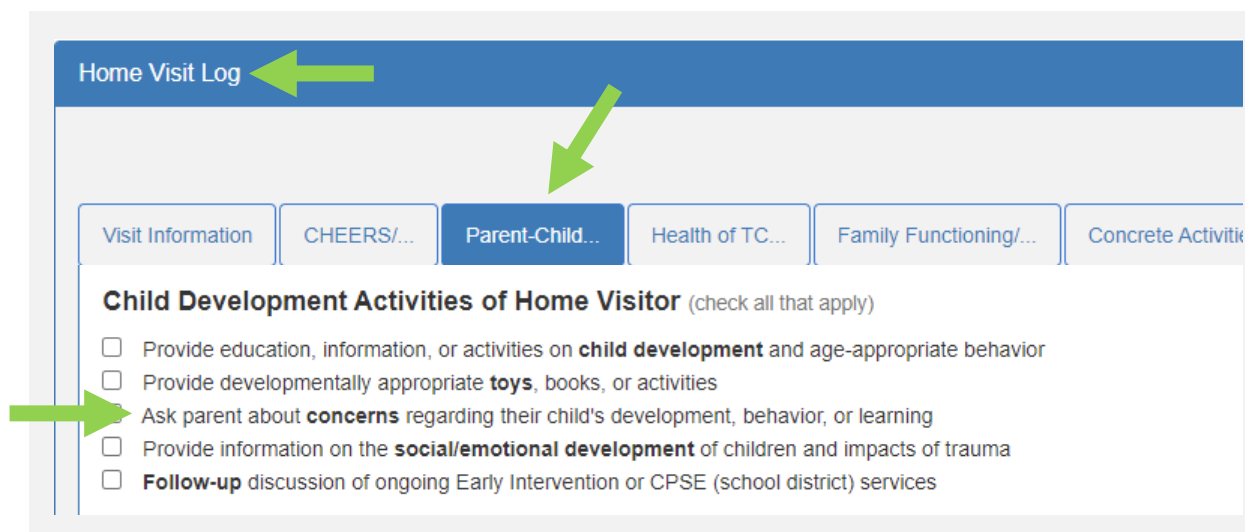Domain: Improvements in school readiness, child academic achievement

📊 **Definition:** Percent of home visits where primary caregivers (PC1s) were ***asked by the FSS*** if they have any concerns regarding their child's development, behavior, or learning (even if they do not have concerns).

👥 **Cases that meet measure** (Numerator): # of postnatal home visits where PC1s enrolled in home visiting were ***asked*** if they have any concerns regarding their child's development, behavior, or learning.

🏛 **Total cohort** (Denominator): # of postnatal home visits.

🎯 **Your Focus:** Ask about behavioral concerns at every HV; record it in the HV Log section below.

Benchmark 13: Behavioral Concerns
Domain: Improvements in school readiness, child academic achievement

🔍 **MIS Report | Match Quality** **Summary of Home Visit Log Activities |** High

Report Notes | Includes the % of postnatal visits where FSSs asked PC1 about concerns regarding their child's development, behavior, or learning

Summary Of Home Visit Log Activities
From 1/1/2024 To 3/31/2024 ← Selectable date range

Site: <--All -->   Case Filters used: <-- None -->

Percentage of time these activities were engaged in during all completed home visits (* - Postnatal visits only) ← Denominator is the # of postnatal home visits during the period (same as MIECHV reporting)

Parent-Child Interaction		Teach, foster communication skills	1
		Discuss child protective issues	2
Parent/Child Interaction Activities	82		
Provide ed/modeling on interaction	24	**Self Sufficiency**	59
Provide ed/info on child management	13	Discuss home environment issues	5
Discuss feelings about baby	75	Teach how to use calendar	2
Provide support regarding stress	16	Teach home management	1
Address infant basic care needs	59	Teach to use public transportation	0
Discuss shaken baby syndrome	2	Discuss child welfare and services	24
View video "Portrait of a Promise"	0	Discuss employment options	45
Provide info on technology effects	0	Teach money management	7
Child Development Activities	53	Address needs for day-care	20
Provide ed/info on child development	38	Teach problem solving skills	9
Provide devl. appropriate toys/books	30	Discuss education/training options	4
Provide info on social/emotional devl.	5	Teach job readiness, job seeking skills	1
Ask parent about devl. concerns (*)	45	**Crisis Intervention**	1
Follow-up on intervention services (*)	4	Help to resolve problems	1

% of postnatal home visits where home visitor asked parent about developmental concerns → (Ask parent about devl. concerns (*) 45)

Benchmark 14: Intimate Partner Violence Screening
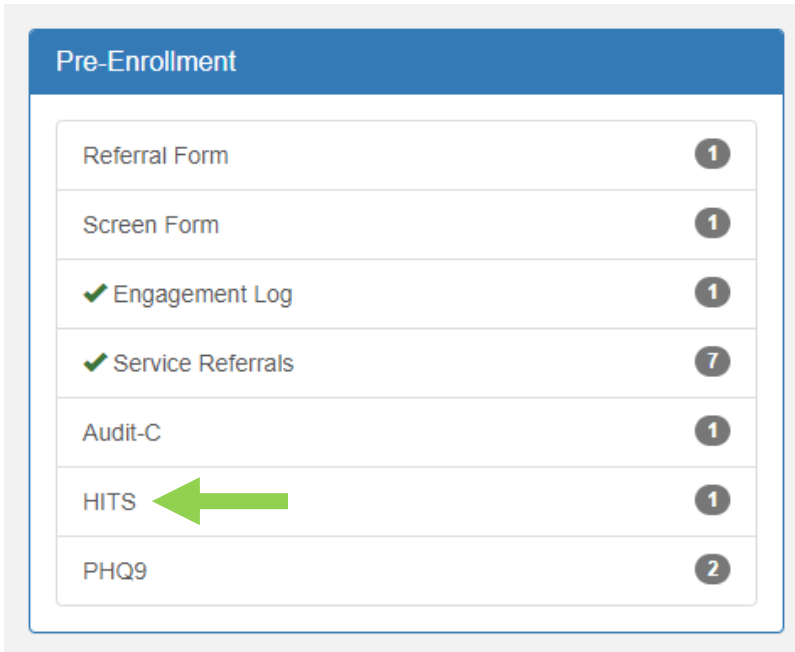## Domain: Reductions in crime or domestic violence

📊 **Definition:** Percent of primary caregivers (PC1s) enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool (HITS).

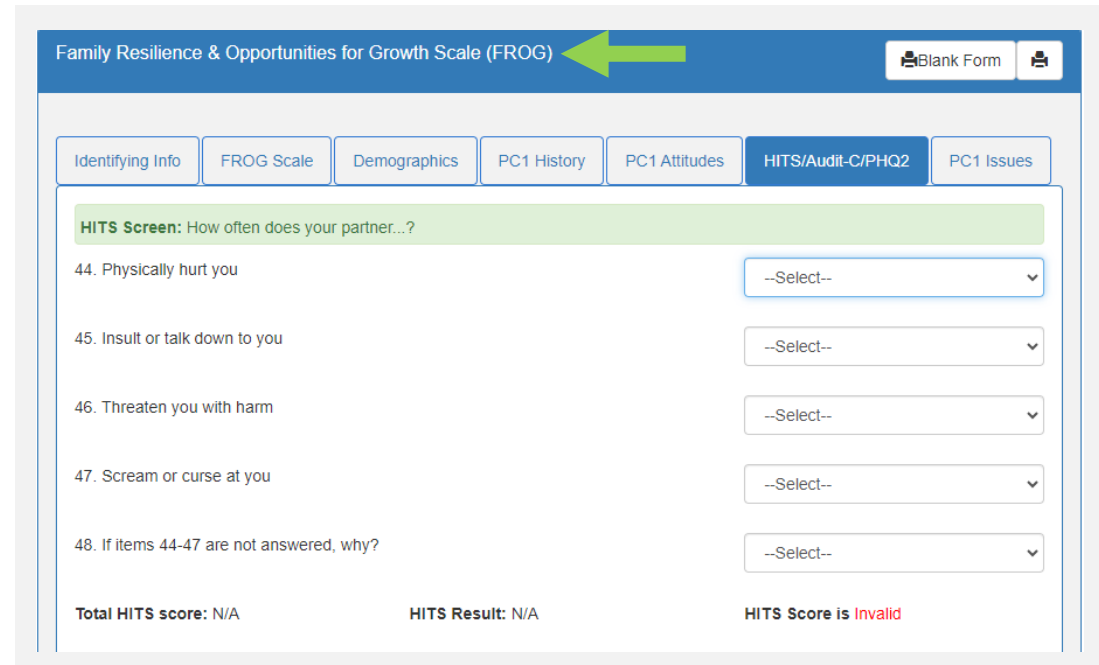👥 **Cases that meet measure** (Numerator): # of PC1s enrolled in home visiting who are screened for IPV using a validated tool (HITS) within 6 months of enrollment.

🏛 **Total cohort** (Denominator): # of PC1s enrolled in home visiting for at least 6 months (reached within the reporting period).

🎯 **Your Focus:** Do the HITS screen and record it!

MIS Report | Match Quality None **|** N/A

Report Notes | N/A

Benchmark 15: Primary Caregiver Education
Domain: Improvements in family economic self-sufficiency
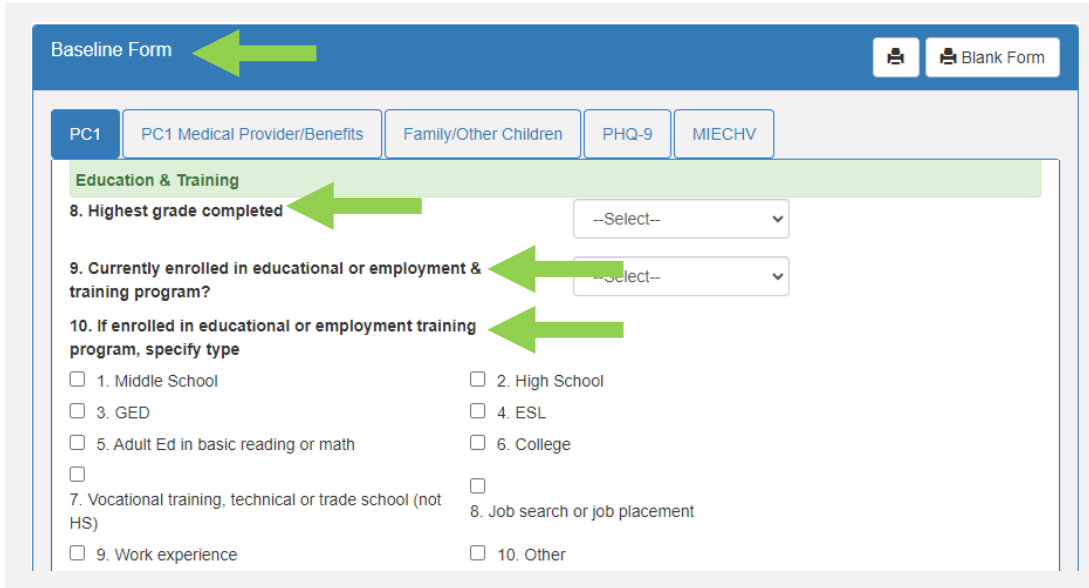
📊 **Definition:** Percent of primary caregivers (PC1s) who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in, maintained continuous enrollment in, or completed high school or equivalent during their participation in home visiting.

👥 **Cases that meet measure** (Numerator): # of PC1s who enrolled in, maintained continuous enrollment in, or completed a high school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator).

🗼 **Total cohort** (Denominator): # of PC1s without a high school degree or equivalent at enrollment.

🎯 **Your Focus:** Have ongoing discussions with PC1s without a HS degree or equivalent about their educational goals.

🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: items FLC5, FLC6 |** Low

Report Notes | Shows % of PC1s under 21 at enrollment with no HS/GED, who enroll in education program or obtain HS/GED by TC's 6-month and first birthday *(MIECHV: % of PC1s, regardless of PC1's age, with no HS/GED at enrollment, who subsequently enroll in, maintain continuous enrollment in, or complete a HS degree or equivalent)*

Selectable quarter or date range

List of PC1s not meeting the measures

Performance Targets

Site: <--All -->

Case Filters used:

3rd Quarter: 01/01/24 - 03/31/24

Contract: 07/01/23 - 06/30/24

Family Life Course Targets	Valid Cases			
	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
FLC5. Education of Participants under 21 at Target Child's six month birthday At least 85% of PC1's under 21 at intake and without a high school degree or GED will be enrolled in a degree bearing program or receive a high school degree or GED certificate by the Target Child's 6 month birthday. Cohort: Target Children 6 to 12 months old and PC1 under 21 years old at Intake without a High School Degree or GED	60%	3	5	5
FLC6. Education of Participants under 21 at Target Child's first birthday At least 90% of PC1's under 21 at intake and without a high school degree or GED will be enrolled in a degree bearing program or receive a high school degree or GED certificate by the Target Child's first birthday. Cohort: Target Children 12 to 18 months old and PC1 under 21 years old at Intake without a High School Degree or GED	50%	2	4	4

MIECHV reporting does not limit PC1 or TC age

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form / Reason	Current Worker / Level @ Report End	Explanation
FLC5		03/30/2023	6 month Follow Up / Not currently enrolled	Level 2	
FLC6		01/23/2023	1 year Follow Up / Not currently enrolled	Level 2	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
FLC5		06/18/2021	6 month Follow Up	01/26/2022	Form out of window	Level 2

List of PC1s with invalid/missing data (excluded from measures)

Benchmark 16: Continuity of Insurance Coverage

Domain: Improvements in family economic self-sufficiency
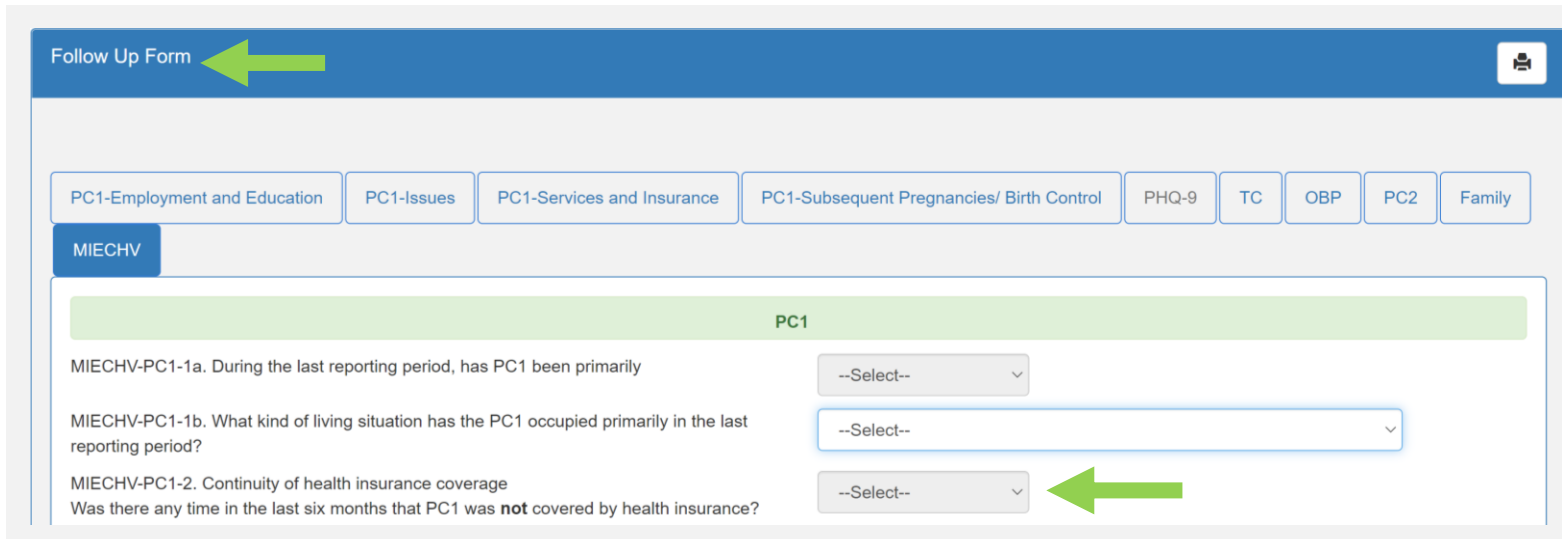
📊 **Definition:** Percent of primary caregivers (PC1s) enrolled in home visiting for at least 6 months who had continuous health insurance coverage for the most recent 6 consecutive months.

👥 **Cases that meet measure** (Numerator): # of PC1s enrolled in home visiting who reported having continuous health insurance coverage for the most recent 6 consecutive months within the past year.

🏛 **Total cohort** (Denominator): # of PC1s enrolled in home visiting for at least 6 months.

🎯 **Your Focus:** Try to make sure all PC1s have continuous health insurance coverage and ask about it regularly.

🔍
MIS Report | Match Quality None **|** N/A

Report Notes | N/A

Benchmark 17: Completed Depression Referrals

Domain: Improvements in the coordination and referrals for other community resources and supports

📊 **Definition:** Percent of primary caregivers (PC1s) *referred* to services for a positive screen for depression (PHQ-9) who *receive* one or more service contacts.

👥 **Cases that meet measure** (Numerator): # of PC1s enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator).

🏛 **Total cohort** (Denominator): # of PC1s enrolled in home visiting who had a positive screen for depression (PHQ-9) within 3 months of enrollment (for those not enrolled prenatally; reached within the reporting period) or within 3 months of delivery (for those enrolled prenatally; reached within the reporting period) and were referred for services.

🎯 **Your Focus:** When a PC1 has a positive PHQ-9 screen, make the referral and follow up on service delivery status and record it.
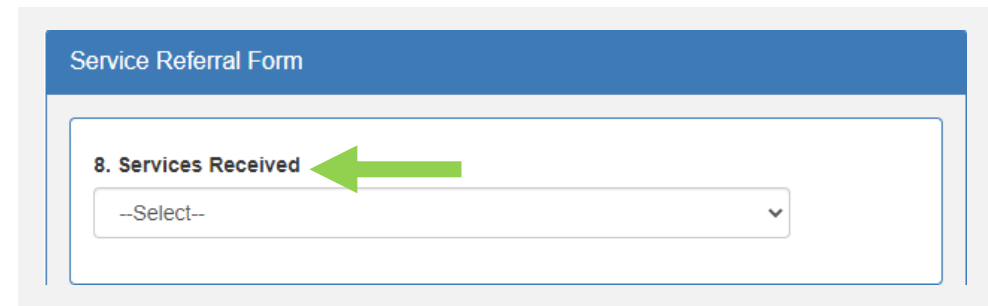
Benchmark 17: Completed Depression Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

🔍 **MIS Report | Match Quality** **Quarterly Service Referrals |** Low

Report Notes | Includes the outcome of any referral made in the past quarter; not dependent on when PC1 enrolled *(MIECHV cohort: PC1s with a positive PHQ-9 screen within 3 months of enrollment and who were referred to services)*; doesn't break out depression services specifically, just categorizes them as "Counseling/Support Services"

Selectable quarter or date range

Service Referrals

Site: <--All -->

Separated by arranged and inform & discuss referrals

Case Filters used:

3rd Quarter 01/01/24 - 03/31/24

Contract: 07/01/23 - 06/30/24

Arranged by Family Support Specialists

	Total Referrals	Started Service	Pending Service	Didn't Receive Service
Concrete Services	67 (54%)	57 (46%)	7 (6%)	3 (2%)
Counseling / Support Services	7 (6%)	6 (5%)	0 (0%)	1 (1%)
DSS / HRA	4 (3%)	1 (1%)	1 (1%)	2 (2%)
Employment, Training and Education	1 (1%)	1 (1%)	0 (0%)	0 (0%)
Family/Social Support Services	1 (1%)	0 (0%)	0 (0%)	1 (1%)
Health Care	8 (7%)	2 (2%)	6 (5%)	0 (0%)
Nutrition	15 (12%)	14 (11%)	1 (1%)	0 (0%)
Other Services	20 (16%)	19 (15%)	1 (1%)	0 (0%)
Total Referrals	123 (100%)	100 (81%)	16 (13%)	7 (6%)

Reason Service not received (Summary of 'Didn't Receive Services' above)

Total Service not received	7 (100%))
Already receiving service/Referred by another agency	5 (71%)
Child care unavailable	0 (0%)
Geographically inaccessible	0 (0%)
Insufficient participant resources	0 (0%)
No health insurance	0 (0%)
No transportation available	0 (0%)
Other (specify)	2 (29%)
Parent won't give consent	0 (0%)
Participant did not follow through	0 (0%)
Participant not eligible for service	0 (0%)
Participant rejected for service	0 (0%)

Benchmark 17: Completed Depression Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports
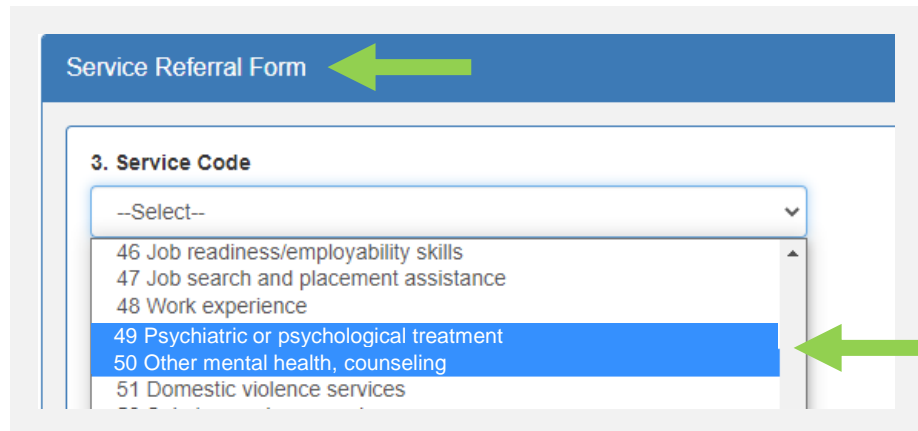
🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: item FLC7 |** Low

Report Notes | Lists PC1s who are flagged for needing mental health, domestic violence, or substance abuse services at intake who did not receive a referral within 6 months of enrollment; doesn't distinguish depression from other mental health issues; doesn't contain information about starting services

Selectable quarter or date range

List of PC1s not meeting the measure

Performance Targets

Site: <--All -->
3rd Quarter: 01/01/24 - 03/31/24

Case Filters used:
Contract: 07/01/23 - 06/30/24

Family Life Course Targets	Valid Cases			
	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
FLC7. Referrals for Needed Services				
At least 75% of enrolled participants with DV, Mental Health, or Substance Abuse issues identified on their assessment will be referred for the appropriate services within 6 months of enrollment	67%	2	3	3
Cohort: Participants enrolled from 6 to 12 months with DV, Mental Health, or Substance Abuse issues identified on the assessment				

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form Reason	Current Worker / Level @ Report End	Explanation
FLC7		06/24/2023	Service Referrals Missing service code 49 or 50 referral.	Level 1	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
FLC7		05/25/2023	Service Referrals		Form(s) not reviewed by supervisor	Level CO

List of PC1s with invalid/missing data (excluded from measure)

Benchmark 18: Completed Developmental Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

📊 **Definition:** Percent of children enrolled in home visiting with positive screens for developmental delays (measured using the ASQ) who receive services in a timely manner.

👥 **Cases that meet measure** (Numerator): # of children enrolled in home visiting who a) received individualized developmental support from a home visitor (i.e., subsequent ASQ); b) were referred to early intervention services (service code: 7) and received an evaluation within 45 days; OR c) were referred to other community services (service code: 8, 17, or 65) and received services within 45 days (and met the conditions specified in the denominator).

🏛 **Total cohort** (Denominator): # of children enrolled in home visiting with positive screens for developmental delays (measured using the ASQ).

🎯 **Your Focus:** When a child has a positive ASQ screen, make the referral and follow up on service delivery status and record it.

Benchmark 18: Completed Developmental Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

🔍 **MIS Report | Match Quality** **6-5.D Developmental Delay Tracking and Follow-up |** Low

Report Notes | Lists all TCs by PC1ID who were flagged on the ASQ; lists referral date, service start date, service code, and nature of referral (inform & discuss or arrange); includes TCs who are already receiving services *(MIECHV excludes them)*; doesn't provide numerator, denominator, or percent of cases who are referred and receive services

---

6-5.D Developmental Delay Tracking and Follow Up for 01/01/2023 - 03/31/2024 ← Selectable date range

Site: <--All -->   Case Filters used: <-- None -->

Current Worker: Supervisor:

Listed by worker and PC1ID

PC1ID	TC Name	TC DOB	Intake Date	Discharge Date
		03/23/2019	02/01/2019	

Screenings that indicate potential developmental delay

ASQ details where developmental delay was suspected →

Screening	Screening Date	In Window?	Reason delay suspected	Was TC referred?	Has target child started receiving developmental services?
ASQ	05/03/2019	Yes	At least one area has a score that is under cutoff.	Yes	

Service referrals related to TC developmental delay

Details on service referrals →

Service code	Nature of referral	Referral date	Agency referred to	Services received?	Date started
17-Developmental screening & services	Arrangements	05/03/2019	Learning activities	Yes	05/15/2019

Benchmark 18: Completed Developmental Referrals
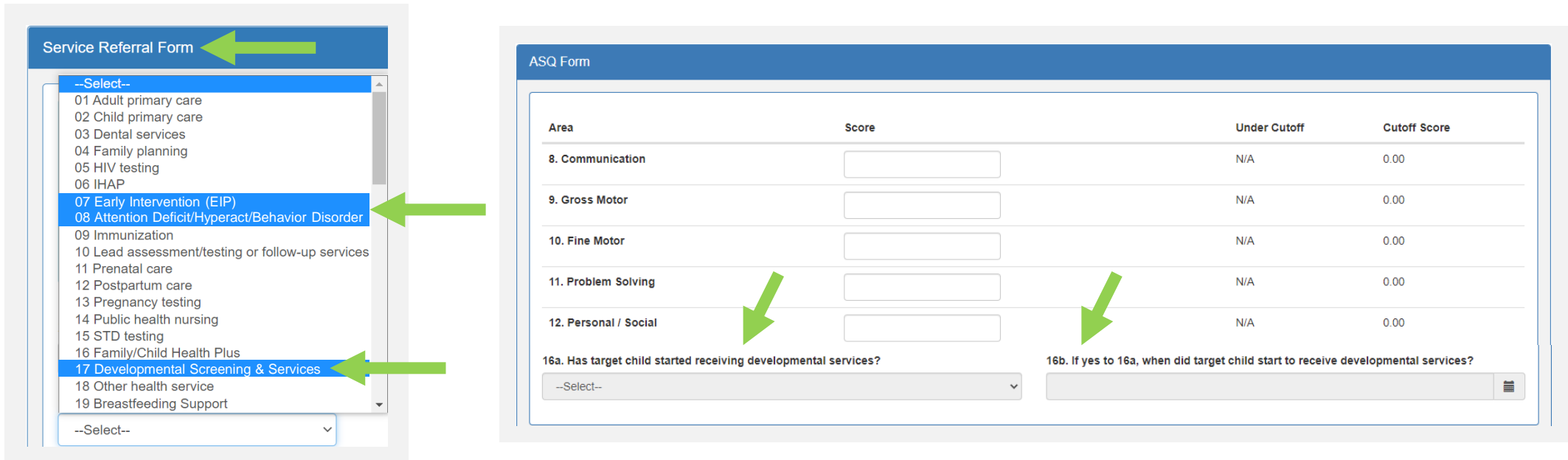Domain: Improvements in the coordination and referrals for other community resources and supports

Systems
Outcome

🔍 **MIS Report | Match Quality** **Quarterly Service Referrals |** Low

Report Notes | Provides the outcome of any referral made in past quarter; not dependent on when PC1 enrolled; doesn't break out developmental issues specifically, just categorizes them as "Healthcare" or "Other Services"

Selectable quarter or date range

Service Referrals

Site: <--All -->

Separated by arranged and inform & discuss referrals

3rd Quarter	01/01/24 - 03/31/24
Contract:	07/01/23 - 06/30/24

Case Filters used:

Arranged by Family Support Specialists

	Total Referrals	Started Service	Pending Service	Didn't Receive Service
Concrete Services	67 (54%)	57 (46%)	7 (6%)	3 (2%)
Counseling / Support Services	7 (6%)	6 (5%)	0 (0%)	1 (1%)
DSS / HRA	4 (3%)	1 (1%)	1 (1%)	2 (2%)
Employment, Training and Education	1 (1%)	1 (1%)	0 (0%)	0 (0%)
Family/Social Support Services	1 (1%)	0 (0%)	0 (0%)	1 (1%)
Health Care	8 (7%)	2 (2%)	6 (5%)	0 (0%)
Nutrition	15 (12%)	14 (11%)	1 (1%)	0 (0%)
Other Services	20 (16%)	19 (15%)	1 (1%)	0 (0%)
Total Referrals	123 (100%)	100 (81%)	16 (13%)	7 (6%)

Reason Service not received (Summary of 'Didn't Receive Services' above)

Total Service not received	7 (100%))
Already receiving service/Referred by another agency	5 (71%)
Child care unavailable	0 (0%)
Geographically inaccessible	0 (0%)
Insufficient participant resources	0 (0%)
No health insurance	0 (0%)
No transportation available	0 (0%)
Other (specify)	2 (29%)
Parent won't give consent	0 (0%)
Participant did not follow through	0 (0%)
Participant not eligible for service	0 (0%)
Participant rejected for service	0 (0%)

Benchmark 19: Intimate Partner Violence Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

Definition: Percent of primary caregivers (PC1s) enrolled in home visiting with positive screens for IPV (measured using the HITS) who receive referral information to IPV resources.

Cases that meet measure (Numerator): # of PC1s enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator).

Total cohort (Denominator): # of PC1s enrolled in home visiting with positive screens for IPV (measured using the HITS) within 6 months of enrollment.

Your Focus: When a PC1 has a positive screen, make the referral and record it.

Benchmark 19: Intimate Partner Violence Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

🔍 **MIS Report | Match Quality** **Quarterly Performance Targets: item FLC7 |** Medium-low

Report Notes | Lists PC1s who are flagged for needing domestic violence (service code: 51), mental health or substance abuse services at intake who did not receive a referral within 6 months of enrollment *(MIECHV: % of PC1s with positive HITS screen who were referred to IPV services; no specified timeframe)*

Selectable quarter or date range

Performance Targets

Site: <--All -->

3rd Quarter: 01/01/24 - 03/31/24

Case Filters used:

Contract: 07/01/23 - 06/30/24

Family Life Course Targets	Valid Cases			
	Percentage who meet Performance Target	Number who meet Performance Target	Total Valid Cases	Total Cases
FLC7. Referrals for Needed Services At least 75% of enrolled participants with DV, Mental Health, or Substance Abuse issues identified on their assessment will be referred for the appropriate services within 6 months of enrollment Cohort: Participants enrolled from 6 to 12 months with DV, Mental Health, or Substance Abuse issues identified on the assessment	67%	2	3	3

List of PC1s not meeting the measure

Cases Not Meeting

PT#	PC1ID / Full Name	Target Child DOB	Form Reason	Current Worker / Level @ Report End	Explanation
FLC7		12/19/2022	Service Referrals Missing service code 51 referral. Missing service code 49 or 50 referral.	Level 1	

Invalid / Missing Cases

PT#	PC1ID / Full Name	Target Child DOB	Form	Form Date	Reason	Current Worker / Level @ Report End
FLC7		05/25/2023	Service Referrals		Form(s) not reviewed by supervisor	Level CO

List of PC1s with invalid/missing data (excluded from measure)

Benchmark 19: Intimate Partner Violence Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

MIS Report | Match Quality **Big Three – Assessment PC1 Issues |** Medium-low

Report Notes | Calculates the percent of PC1s (with an intake date between the report start and end date) who reported substance abuse, mental health, or domestic violence issues on the assessment that received a relevant service referral within 6 months of intake *(MIECHV: % of PC1s with positive HITS screen who were referred to IPV services; no specified timeframe)*

Selectable date range

Big Three - Assessment PC1 Issues
for Active Participants Enrolled Between 10/01/2022 and 08/31/2024

Site: <--All -->   Case Filters used:

Total Cases with PC1 Issues on Assessment	Issue Totals [Cases with referral / Cases (Percentage)]		
	Substance Abuse	**Mental Health**	**Domestic Violence**
33	1 / 7 (14%)	15 / 31 (48%)	1 / 8 (13%)

PC1 ID	Assessment Date	Intake Date	Current Level	Substance Abuse Issue	Mental Health Issue	Domestic Violence Issue
Current Worker:					**Supervisor:**	
	08/08/2022	09/01/2022	Level 2	No	Yes *	No
	06/29/2022	07/12/2022	Level 2	No	Yes	Yes *
	11/29/2022	11/29/2022	Level 2	No	Yes *	Yes

* indicates that a Service Referral has been made for this issue for PC1 within six months of the Intake Date

(%) of PC1s who reported DV issues on the assessment who received a DV service referral within 6 months of intake

No = DV not reported as an issue at assessment

Yes* = DV reported as an issue on the assessment and DV service referral made within 6 months of intake

Yes = DV reported as an issue on the assessment, but no DV service referral made within 6 months of intake

Listed by worker and PC1ID

Benchmark 19: Intimate Partner Violence Referrals
Domain: Improvements in the coordination and referrals for other community resources and supports

🔍 **MIS Report | Match Quality** **Count of Service Referrals by Code |** Low

Report Notes | Counts the # of domestic violence service referrals (service code: 51) given in period (category will not appear on report if no corresponding referrals were given in the period), but does not have a denominator of PC1s who screened positive for IPV

Selectable date range

Count of Service Referrals by Code

From 1/1/2024 To 3/31/2024

Case Filters used: <-- None -->

Worker: All Workers

Service Category: Concrete Services (CON)

Service Code	# of Referrals
56-Clothing, furniture, other household items	90
57-Housing assistance / emergency shelter	23
Total for (CON)..	113

Service Category: Counseling & Intensive Support Services (CSS)

Service Code	# of Referrals
49-Psychiatric or psychological treatment	1
50-Other mental health, counseling	29
51-Domestic violence services	4
52-Substance abuse services	1
54-Support groups	26
Total for (CSS)..	61

Numerator

Note: no denominator of PC1s who screened positive for IPV

Additional Resources

1. MIECHV-MIS Report Crosswalk

Recommended Audience: Program Managers, Supervisors At MIECHV Programs

Learning Objectives:

- Understand the items and constructs being measured by MIECHV

- Identify MIS reports that can be used to track performance on MIECHV benchmarks

- Understand in detail how closely the MIS reports match MIECHV reporting (i.e., match quality)

- Monitor and evaluate their own program's performance on the MIECHV benchmarks in between quarterly reporting

2. MIECHV Benchmarks Quarterly Meeting Slides: September 2024

Recommended Audience: Program Managers, Supervisors At MIECHV Programs

Learning Objectives:

- Identify MIS reports that can be used to track performance on MIECHV benchmarks

- Understand how closely the MIS reports match MIECHV reporting (i.e., match quality)

- Monitor and evaluate their own program's performance on the MIECHV benchmarks in between quarterly reporting

3. Video by CHSR on MIECHV reporting

Recommended Audience: Program Managers, Supervisors At MIECHV Programs

Learning Objectives:

- Understand the items and constructs being measured by MIECHV

- Identify the additional items/activities MIECHV programs must ask/perform, and know how to answer them

- Distinguish the different types of program benchmarks, and be able to determine what is needed to meet each item

- Monitor and evaluate their own program's performance on the MIECHV benchmarks through CHSR's reports

Slides from Video